

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

Donna Edwards

(b) Address (number and street)

8904 Glen Lane

☐ Check if address changed

2. Identification Number

H6MD04183

(c) City, State and ZIP Code

Fort Washington

MD

20744

3. Is This Statement

☐ New (N)

OR

☒ Amended (A)

4. Party Affiliation

DEMOCRATIC PARTY

5. Office Sought

House

6. State &amp; District of Candidate

MD 04

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 election(s).  
(year of election)

**NOTE:**This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

DONNA EDWARDS FOR CONGRESS

(b) Address (number and street)

P.O. Box 441153

(c) City, State and ZIP Code

FORT WASHINGTON

MD

20749

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

DEMOCRATIC WOMEN 2010

(b) Address (number and street)

1341 G STREET NW SUITE 740

(c) City, State and ZIP Code

WASHINGTON

DC

20005

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

Donna Edwards

Date

12/04/2009

**NOTE:**Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--	--